

Permission for Athletes to Drive Form



To Whom It May Concern:

_____ a student at Central Valley Christian,
(Students Name)

has my permission to drive to _____
(Location)

on _____ for the sporting event of _____.
(Date) (Sport)

I accept all responsibility for my son/daughter for opting to drive including

- Valid insurance
- Vehicle operating expense
- Any liability resulting from this decision

Not holding Central Valley Christian Schools responsible for any events that may result from my decision regarding this matter

I also understand that if the administration of Central Valley Christian High School determines that this driving privilege has been abused, this permit may be revoked at any time.

(Parent/Guardian signature)

_____/_____/_____
(Date signed)

(Student signature)

_____/_____/_____
(Date signed)

For School Use Only

This permit is approved denied

(Administrators signature)

_____/_____/_____
(Date signed)